UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR **PATENT** FEE REFUND	
1 Date of Request: 6|20|05	2 Serial/Patent # 10 519 69

3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
✓ Filing			$ 100
Amendment			$
Extension of Time			$
Notice of Appeal/Appeal			$
Petition			$
Issue			$
Cert of Correction/Terminal Disc.			$
Maintenance			$
Assignment			$
Other			$

	7 TOTAL AMOUNT OF REFUND	$

8 TO BE REFUNDED BY:

	Treasury Check
	Credit Deposit A/C #:

10 REASON:

	Overpayment
	Duplicate Payment
	No Fee Due (Explanation):

9 | 0 | 7 | -- | 0 | 1 | 8 | 1 |

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: Darrell Cittman   TITLE: Paralegal

SIGNATURE: Darrel Cotto   PHONE: 703·308·9140 x 20

OFFICE: _____

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THIS SPACE RESERVED FOR FINANCE USE ONLY:

APPROVED: _____   DATE: _____

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B

FORM PTO 1577
(01/90)